

# FANNP NEWS



INSIDE: POCKET NOTEBOOK • LEGISLATIVE NEWS • EDUCATIONAL OFFERINGS • BRING IT ON • LETTER FROM THE PRESIDENT • BRAG BOARD • CONFERENCE UPDATE • GET INVOLVED WITH FANNP

The Publication of the Florida Association of Neonatal Nurse Practitioners



## SPECIAL SESSION WRAP-UP AND BUDGET VETO REPORT

### Budget

The special session concluded Friday, June 19, with lawmakers approving a \$78 billion budget. Gov. Rick Scott swiftly signed the budget and vetoed a historic \$461 million in projects, in a number of project areas, including water, historic preservation, and others. Among the vetoed items:

- \$250,000 for the Florida Center for Nursing
- \$73,520 to Barry University's school of nursing and social work
- \$495,000 for a Nurse-Family Partnership Program in Miami-Dade County
- \$1.7 million for private-duty nursing services (reportedly, those services received an increase in the current budget year)
- \$9.5 million in grant money to free and charitable clinics served by volunteer nurses, physicians and other healthcare providers

The budget does include money to continue the Low Income Pool (LIP) program, which distributes money to hospitals to offset their cost of providing charity care to uninsured or underinsured individuals. The amount, however, is far less than the \$2.2 billion authorized by the federal government for the current year. The new state budget includes \$1 billion for LIP in 2015-2016, but decreases to \$608 million the following year. On Wednesday, the federal government announced that it would agree "in principle" to the budgetary change.

"LEGISLATIVE" continues on page 3

## FANNP Conference Update

The Conference Planning Committee has planned another great conference! Our keynote speaker this year will be Robin Bissinger, PhD, APRN, NNP-BC, FAAN, Executive Director National Certification Corporation. Dr. Bissinger will "kick off" the conference with a discussion titled, "The Future of Nursing". We have also confirmed many other speakers who will be discussing current issues effecting our practices. For the review track, we have many of your favorite speakers returning this year! The beach party scheduled for Wednesday evening is back by popular demand with Rob, our favorite DJ! This year's theme, "Come Celebrate the NNP!", celebrates the 50th anniversary of the NNP role. We are continuing the cocktail hour and poster session to display some of the diligent work many of you have been busily preparing! If you do not have a conference brochure by now, you can find a downloadable version and additional conference details on our website, FANNP.org. We hope to see you all at the conference in October!

*Marylee Kraus, MSN, NNP-BC*



# Letter from the President

Hello FANNP members,

I can't believe it is already the end of summer and our annual conference is a few short weeks away! I certainly hope you are making plans to attend FANNP's National Neonatal Nurse Practitioner Symposium: Clinical Update and Review on October 13-17th, 2015 at the beautiful Sheraton Sand Key Resort in Clearwater, Florida. For those of you attending



our conference, I hope you plan to take advantage of not only the formal presentations but also the "after hours" events. These events include a poolside welcome reception and a beach party. In addition, there is a poster session complete with a cash bar and hors d'oeuvres where you can learn about the latest scholarly activities presented by your peers. These venues offer both experienced and novice NNPs the chance to meet others in your field as well as develop mentorship and collaborative opportunities.

In addition, the conference committee has arranged a stellar line up of knowledgeable, motivating and dynamic speakers to increase our knowledge base regarding the care

of our most vulnerable patients. Of course, we also offer the opportunity for the newest members of our profession to engage in an in-depth review of the NCC examination. Evaluations from previous attendees strongly support the quality of our review course. Of course, the highest recommendation comes from those who claim our review course assisted them to successfully pass the NCC examination.

FANNP will be holding elections this year and I strongly encourage all members to consider volunteering to run for office. No experience or credentials are needed, just the desire to contribute to your profession and work with some truly amazing individuals. Even if you have just graduated, consider volunteering your time. I also strongly recommend attending the Business Meeting (served with a wonderful brunch buffet) to learn more about this organization. People often feel self-conscious about volunteering for a position in an organization such as FANNP. Please don't feel this way! Please email me at parkela@ufl.edu and we can arrange a phone conversation to discuss how you can become involved and whether this is something you would be interested in. If you don't call, don't be surprised if you are approached during the conference by myself or one

of the board members, asking for your time and talent!

I look forward to seeing everyone in October!

Please do not hesitate to contact me for suggestions, questions, comments or concerns.

*Leslie Parker, PhD, NNP-BC  
President, FANNP*

## BRING IT ON ANSWERS

from page 8

### 1. Answer is B;

Beckwith-Wiedemann syndrome is a condition that generally includes macroglossia, omphalocele and hyperplastic visceromegaly. Hypoglycemia is common, seen in more than 50% of cases. There is islet cell hyperplasia, hyperinsulinism, and low FFAs. Plasma growth hormone levels, however, are normal.

### 2. Answer is A;

The x-ray described is consistent with and classic for duodenal atresia. Infants with duodenal atresia have a high risk of co-existing anomalies and syndromes such as congenital heart disease, trachea-esophageal fistula, renal abnormalities and trisomy 21.

### 3. Answer is B;

Facial nerve palsy involves agenesis of the depressor anguli oris muscle and with prominent asymmetry of the face when crying occurs. There can be a thinning of the lateral portion of lower lip, wrinkling of the forehead, eye closure and symmetric nasolabial folds. Bilateral paralysis is rare and ptosis of the eyelid is more common to Horner's syndrome. If the cause of the facial nerve palsy is due to birth trauma, 90% of the neonates can expect recovery within the first month of life.

### THE FLORIDA ASSOCIATION OF NEONATAL NURSE PRACTITIONERS

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## LEGISLATIVE from page 1

The budget also includes an additional \$1 billion to increase hospital reimbursement rates in an effort to make up for the lost LIP funding. The money comes from state and federal funding. The new budget does not include federal Affordable Care Act dollars to make healthcare coverage available to an additional 800,000 uninsured Floridians.

In the new budget, 813 positions are eliminated from the Department of Health, which was justified by budget writers because they were “unfilled” positions. The budget fails to include raises or bonuses for state employees. Rep. Michelle Rehwinkle Vasilinda (D-Tallahassee) filed a bill that would have given state employees a seven percent pay adjustment to their base salary. The bill was not addressed during the special session and died.

The 2015-2016 budget went into effect Wednesday, July 1<sup>st</sup>, 2015.

### Policy

Florida lawmakers entered into the three-week special session with a limited list of bills separately sought by the House and Senate. The Senate put forth legislation that would create the Florida Health Insurance Affordability Exchange (FHIX) Program, which would allow previously uninsured individuals in certain income categories to purchase private health plans with subsidies provided by Affordable Care Act funding.

The House had opposed this legislation throughout the regular session; an impasse that led to the abrupt adjournment of the regular session on April 28, but agreed to hear the issue during the special session. In turn, House leadership also offered up for discussion a package of bills they considered a free-market approach to increasing access to patient care. They included the following:

#### Ambulatory/Recovery Care

**Centers(RCC)** — this bill would have allowed ambulatory care centers to admit patients for 24 hours and create a new license for recovery care centers.

RCCs would provide post-surgical care to patients for up to 72 hours.

**Direct Primary Care** - this bill would have allowed patients to bypass health insurance plans and enter into contracts with healthcare practitioners to provide primary care. Nurse practitioners would benefit from such contracts.

**Certificate of Need** - this bill would have eliminated the regulatory process that hospitals undergo when seeking new construction or the expansion of current buildings. Nursing homes and hospice centers would still be required to go through this process.

**ARNP and PA Prescribing** - this would have allowed ARNPs and physician assistants (PA) to prescribe controlled substances. This bill (27A) did not address independent practice for nurse practitioners.

#### **State Employee Health Insurance**

- this bill would have restructured insurance plans for state employees in four coverage tiers, with incentives given to employees to take less expensive plans.

The Senate passed the FHIX healthcare legislation in a 33:3 vote, but the measure failed in the House with a vote of 41:72. In turn, the House approved its package of healthcare bills with the prescribing bill (HB 27A), passing in an overwhelming vote of 97:2 (the no-votes were from Reps. John Tobia and Janet Cruz). The state employee health insurance bill drew a lengthy floor debate from Democrats, but it passed 71:28.

The House sent its bill package to the Senate, which scheduled a hearing for June 9<sup>th</sup> in the Senate Health Policy Committee. The day prior to the meeting, committee Chairman Aaron Bean announced the meeting was cancelled and recommended the formation of a task force over the summer to discuss the bills, including the prescribing legislation. The bills were never discussed during the remainder

of the special session and died when the Legislature adjourned on Friday, June 19<sup>th</sup>.

### Health Care Bills Addressed During Special Session

**Abortions (signed into law):** HB 633 requires a 24-hour waiting period and a minimum of one face-to-face doctor appointment prior to undergoing an abortion.

**KidCare (failed):** SB 294/HB 829 eliminates the five-year waiting period for lawfully residing immigrant children seeking to enroll in Florida’s subsidized health insurance program.

**Medicaid expansion (failed):** SB 2A creates a state-run marketplace for private health insurance available to low-income Floridians who work and pay small monthly premiums.

**Nurses (failed):** HB 27A allows advanced registered nurse practitioners (ARNP) to prescribe and dispense medications.

**Right medicine (failed):** SB 784/HB 863 creates a commission to review insurance plans that limit therapies and pharmaceuticals.

**Right to try (signed into law):** HB 269 allows terminally ill patients to try experimental treatments.

**Telemedicine (failed):** HB 545/SB 478 creates standards for telemedicine and using web and videoconferencing technology to treat patients.

**Transgender restrooms (failed):** SB 1464/HB 583 prohibits transgender individuals from using restrooms aligned with their gender identity.

### Bills of Interest

**Beer growlers (signed into law):** SB 186 allows Florida craft breweries to sell beer in 64-ounce “growlers.”

**Equal pay (failed):** SB 98/HB 25 require that women get equal pay with men on state contracts.

## LEGISLATIVE from page 3

### Federal Legislation Updates

The Registered Nurse Safe Staffing Act (H.R. 2083) was referred to the *House Energy & Commerce and the Subcommittee on Health and the House Ways and Means* on April 29<sup>th</sup>, 2015.

The 21<sup>st</sup> Century Cures Act (H.R. 6) major actions:

- 05/19/2015 Introduced in House
- 07/07/2015 Reported (amended) by the Committee on Energy and Commerce H. Rept. 114-190, Part I.
- 07/07/2015 Committee on Ways and Means discharged
- 07/10/2015 Passed/agreed to in House: On passage passed by recorded vote: 344 - 77
- 07/13/2015 Referred to Senate committee: Received in the Senate, read twice and referred to the Committee on Health, Education, Labor, and Pensions

The Protecting Our Infants Act (H.R. 1462): This bill requires the Agency for Healthcare Research and Quality (AHRQ) to report on prenatal opioid abuse and symptoms of drug withdrawal in newborns consistent with neonatal abstinence syndrome (NAS). An opioid is a drug with effects similar to opium, such as heroin or certain pain medications. There has been a Committee consideration meeting and mark up session held on July 29<sup>th</sup>, 2015.

### What's coming up?

#### *Ensure Members of Congress Hear from ARNPs throughout August*

This week signifies the beginning of the August district work periods for the House of Representatives, while the Senate remains in session for one more week, after which, they too will return home. Members of Congress use a significant portion of this time in August to assess the constituents they represent and the issues that are important to them. By meeting with

Members of Congress while they are in their home district, ARNPs have a significant opportunity to influence policy and the future of ARNP practice. Whether your elected official is holding a Meet & Greet, Townhall, eTownhall, or similar in-district opportunity, please know that the American Association of Nurse Practitioners (AANP) staff is here to support you throughout the entire process.

National Nurse Practitioner Week 2015 will be held November 8<sup>th</sup> – 14<sup>th</sup>. This special week offers numerous opportunities to bring recognition to the NP role and increase awareness of the exceptional care that NPs provide. AANP will provide an online resource guide for your use in planning activities to celebrate NP Week and the 50<sup>th</sup> anniversary of the NP program. The guide will be available at [www.aanp.org](http://www.aanp.org) in mid-September and will contain information such as a sample news release, talking points, an NP fact sheet, community activities, a media interview guide, and guidelines for writing a letter to the editor. A template for creating an NP Week proclamation is available here for your use in securing special recognition for NPs by your local, state and national elected officials.

### Of Note .....

A recent article in Forbes Magazine discussed five diagnostic tests that may not be necessary in the NICU. This is part of the Choosing Wisely Campaign, which encourages physicians and other healthcare providers to evaluate and discuss diagnostic tests, and medical procedures that may not be necessary. The American Academy of Pediatrics (AAP) became involved in this initiative in 2013 and drafted a list of five medical procedures or practices that may be unnecessary. To read more about this go to <http://www.forbes.com/sites/tarahaele/2015/07/20/5-newborn-tests-and-treatments-your-baby-in-nicu-doesnt-need/>

## Are YOU looking for a way to be involved with FANNP?

FANNP is seeking an organized, enthusiastic and creative individual for the role of newsletter editor. All FANNP Members and NNP students are eligible to inquire! If interested in further details, please contact Tiffany Gwartney at [newsletter@FANNP.org](mailto:newsletter@FANNP.org).

### Description:

- Correspond with FANNP board members and scholarship award winners to obtain various components of the newsletter
- Implement minor spelling, grammatical and APA format editing to components of the newsletter as needed
- Correspond with the printer to organize the newsletter
- Communicate with advertisers regarding newsletter ad renewal
- Maintain advertising index for paid and/or expiring ads
- Compose year-end newsletter report regarding highlights and present at the annual business meeting
- Communicate with printer to maintain current FANNP website links and information
- Attend FANNP board member meetings (optional)
- Maintain newsletter archives on flash drive

### Eligibility Requirements:

- Must be a member of FANNP
- Must have a basic understanding of APA formatting, MicrosoftWord, and grammar/spelling skills
- Must possess excellent communication skills

### Compensation:

- FANNP annual conference attendance – FREE!
- Single night of conference hotel fees (as available per FANNP) – FREE!
- Networking with industry professionals

**POCKET NOTEBOOK***Diane McNerney DNP, NNP-BC***Patent Urachus**

1. Definition: Patent urachus is one of the congenital urachal remnant abnormalities. Patent urachus is the failure of the urachus to close completely, resulting in an open channel between the bladder and the umbilicus. A common physical finding in a patient with a patent urachus an umbilicus that appears to “leak” urine.
2. Incidence: Congenital patent urachus is a rare anomaly with an estimated incidence of 0.25:10000 births. Males are affected twice as commonly as females.
3. Pathophysiology: Usually a patent urachus is not associated with other congenital defects, however the literature reports associated anomalies including umbilical cord cyst, umbilical granuloma, omphalocele, meningomyelocele and vaginal atresia.
4. Risk Factors: Complications of a patent urachus are recurrent omphalitis, cystitis and ascending pyelonephritis.
5. Clinical presentation: Persistent, clear fluid leakage from the umbilicus is highly suggestive of a patent urachus while cloudy, serous, or bloody fluid is more indicative of an urachal sinus or cyst. The clinical presentation typically occurs at the age of 1-3 months on average. The characteristics of the drainage are a sign of its source.
6. Diagnostics: Ultrasonography (USG) is the gold standard for diagnosing urachal remnant diseases. Voiding cystourethrogram (VCUG) and CT can be helpful in imaging the patent urachus and detecting lesions that may be unnoticed by ultrasound. A micturating cystourethrogram (MCUG) is useful in confirming the diagnosis of a patent urachus. It provides an anatomical assessment for bladder outlet obstruction, and the presence of vesicoureteric reflux.
7. Management: Symptomatic urachal remnants should be treated surgically by laparoscopy or surgical incision, which includes excision of the urachus from the umbilicus to the dome of the bladder. The urachus can be excised because in normal development it usually obliterates. The umbilicus is not removed.
8. Prognosis: A favorable outcome is expected when the patent urachus is an isolated finding that is associated with normal nuchal translucency.

**References**

Copp, H.L., Wong, I.Y., & Krishnan C. (2009). *Clinical presentation and urachal remnant pathology: implications for treatment. Journal of Urology, Oct; 182(4 Suppl):1921-1924.*

Ming, Shain, T., & Ming-Lun, Y. (2011). *Patent Urachus. New England Journal of Medicine; 365:1328.*

## ***FANNP National Neonatal Nurse Practitioner Symposium: Clinical Update and Review, 2016***

### **POSTER & PODIUM PRESENTATION CALL FOR SUBMISSIONS**

FANNP is seeking abstracts for posters and podium presentations for the annual FANNP National Neonatal Nurse Practitioner Symposium on October 11<sup>th</sup>-15<sup>th</sup>, 2016. The planning committee invites submissions from members as well as non-members. Participation is open to health professionals whose specialty has a focus on the Neonatal Population (this includes but is not limited to NNPs, RNs, Clinical Nurse Specialists, & Neonatologists). We invite colleagues to share their expertise in one of the following categories:

- Original Research
- Innovations in Practice or Education
- Patient Safety
- Quality Improvement and Benchmarking Initiatives
- Case Studies

#### **PODIUM & POSTER PRESENTATION PEER REVIEW PROCESS**

A panel of experts will choose the four best-developed abstracts for a podium presentation. These will be selected on the basis of overall quality, originality and appropriateness to NNP practice. Preference will be given to research with complete data available. Podium presentations are 10 minutes with 3 minutes for questions. \*Podium presenters will receive a \$75 honorarium. All other conference expenses are the responsibility of the podium or poster presenter.

#### **POSTER PRESENTATION**

Abstracts not chosen for podium presentation will be considered for poster presentation. Detailed instructions for the poster presentation will be provided to the primary author at the time of the notification of abstract acceptance.

#### **SUBMISSION REQUIREMENTS**

Abstracts must be submitted electronically. Abstracts should be no longer than 500 words, in 12-point font, with up to 2 additional bibliography pages. The content should be presented in the form of a structured abstract:

- |            |                             |
|------------|-----------------------------|
| ■ Purpose  | ■ Results                   |
| ■ Subjects | ■ Limitations               |
| ■ Design   | ■ Implications for Practice |
| ■ Methods  |                             |

A signed conflict of interest statement & CV (required for CE credits) must be submitted with the abstract. See the attached checklist for complete details. Abstracts that do not follow the submission guidelines will not be reviewed. Abstracts previously presented in other arenas are acceptable for submission.

**NOTE: Include the submission checklist with the abstract.**

**SUBMISSION DEADLINE: June 1<sup>st</sup>, 2016**

**NOTIFICATION OF ACCEPTANCE: July 1<sup>st</sup>, 2016**

**CONFERENCE EXPENSES:** All presenters chosen for the podium and poster presentation are responsible for conference registration fees, travel and all other expenses. Podium presenters will receive a \$75 honorarium.

## **EDUCATIONAL OFFERINGS**

### **The Vermont Oxford Network Annual Quality Congress and Newborn Intensive Collaboration for Quality Symposium**

*October 1-4, 2015*

Sheraton Chicago Hotel & Towers  
Chicago, IL

[www.vtoxford.org](http://www.vtoxford.org)



### **The 26th FANNP Neonatal Nurse Practitioners Symposium: Clinical Update and Review**

*October 13-17, 2015*

Sheraton Sand Key Resort

[www.fannp.org](http://www.fannp.org)

### **National Association of Neonatal Nurses**

#### **30th Annual Education Conference**

*October 22-25, 2015*

Phoenix Convention Center

Phoenix, AZ

[www.nann.org](http://www.nann.org)

### **Council of International Neonatal Nurses**

#### **9th Council of International Neonatal Nurses**

*August 14-17, 2016*

The Westin Bayshore

Vancouver, Canada

[www.COINN2016.neonatalcann.ca](http://www.COINN2016.neonatalcann.ca)



## FANNP Scholarship Funds Available!

FANNP was founded to support the educational advancement of Neonatal Nurse Practitioners and remains committed to promoting education for NNPs.

Each year on December 31st, at least 10% of the available monies in the FANNP general operating budget are put in a scholarship fund.

FANNP is proud to be able to award scholarships to nurses and NNPs continuing their educational pursuits in the field of neonatal health care.

Six scholarships were awarded in 2014 to Melissa Coble, DNP from East Carolina University, Maiana DeCortada, MSN from University of Florida, Tiffany Gwartney, MSN, NNP-BC from Vanderbilt University, Jodi Kurtz, MSN from University of South Alabama, Shonquatta Parson, MSN from University of Alabama at Birmingham, and Amy Trujillo, MSN from University of Florida.

FANNP would like to be able to award more scholarships each year, but we can only award scholarships if we receive applications.

### Are You or is Someone You Know Eligible for a FANNP Scholarship?

FANNP members who attend an educational program leading to a degree related to the health care field between September 15, 2015 and September 15, 2016 are eligible for a 2016 scholarship.

#### *FANNP Scholarship Eligibility Criteria:*

**Scholarship applicants must be FANNP members.**

- All members, student members and associate members are eligible.
- Priority for scholarship award will be given to members, followed by student members and then associate members.
- Priority for scholarship award will be based on length of membership and service to FANNP.

## CLASSIFIEDS

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### 2015-2016 Classified Advertising in the FANNP Newsletter

#### Acceptance of Advertising

- Classified ads only
- Link on website for direct submission
- All advertisements are subject to review and approval by the Editor

**Scholarship applicants must be a licensed RN, ARNP, NNP or equivalent.**

- Preference will be given to currently licensed certificate NNPs working towards a NNP degree.

**Scholarship applicants must attend an educational program leading to a degree related to the health care field during the application period.**

- Preference will be given to those working towards a degree in neonatal health care.
- The application period for the 2016 scholarship is September 15, 2015 to September 15, 2016. (i.e. To be eligible for a 2016 scholarship you must have attended classes sometime between September 15, 2015 and September 15, 2016.)

#### Ad Options

- May run ad in one newsletter or all year-4 total newsletters, December, March, June, and September issues

#### Cost

- \$50.00/ad each newsletter or \$150.00 for all 4 newsletters. No cash discounts.
- Payment must be received in full prior to the scheduled close date for the quarterly issue.
- Payments can be made through the PayPal link on the FANNP website

#### Format

- The classified ad section of the newsletter will be limited to 1 page only with approximately 30 ads per page
- Ads will be processed on a first come first serve basis

#### Closing Dates for Space and Advertising Materials is as Follows

- Ad information and full payment must be received by the 2nd Friday in February to be included in the March newsletter
- Ad information and full payment must be received by the 2nd Friday in May to be included in the June newsletter
- Ad information and full payment must be received by the 2nd Friday in August to be included in the September newsletter
- Ad information and full payment must be received by the 2nd Friday in November to be included in the December newsletter

*FANNP BOD*

- An applicant may receive a maximum of two scholarship awards for each degree sought.

Applicants are asked to include a 3-5 page submission for publication in the FANNP newsletter as part of the application process. The submission can be an original article, a paper you submitted for coursework, a case study, best practice clinical update or a literature review.

The completed scholarship application packet must be postmarked by September 15, 2016.

For questions, more information or to obtain an application please contact FANNP via email at: [scholarships@fannp.org](mailto:scholarships@fannp.org).



*Bring it On...*

## **Practice Questions to Prepare for the NNP Certification Exam**

1. Beckwith-Wiedemann syndrome is a condition most often associated with:
  - A. Hypoinsulinism
  - B. Hypoglycemia
  - C. Islet cell hypoplasia
2. An x-ray shows a “double bubble” and no distal intestinal air. Based upon these findings, the infant is also at risk for:
  - A. Congenital heart disease
  - B. Cystic fibrosis
  - C. Hirschprung’s disease
3. Injury to the peripheral facial nerve is indicated by:
  - A. Bilateral immobility of the facial muscle
  - B. Mouth drawn to the contralateral side with crying
  - C. Ptosis of the eyelid

*Answers on page 2*

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